

**NINE-POINT CRITERIA ANALYSIS
OF
PROPOSED BUILDING STANDARDS
OF THE
OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
REGARDING THE CALIFORNIA BUILDING STANDARDS ADMINISTRATIVE CODE
AND
CALIFORNIA BUILDING CODE
CALIFORNIA CODE OF REGULATIONS, TITLE 24, PARTS 1 & 2**

Building standards submitted to the California Building Standards Commission for approval are required, by Health and Safety Code Subsection 18930 (a), to be accompanied by an analysis which will, to the satisfaction of the Commission, justify their approval. The approval of these proposed building standards is justified as follows:

1) The proposed building standards do not conflict with, overlap, or duplicate other building standards.

Existing law authorizes the Office of Statewide Health Planning and Development (OSHPD) to develop building standards for hospitals, skilled nursing facilities, intermediate care facilities and clinics. The California Building Standards Commission is responsible for promulgating building standards submitted by OSHPD regarding these health facilities. There are no other entities in California with these authorities or responsibilities; therefore, OSHPD has concluded that no conflict, overlap or duplicate will occur between these proposed regulation and existing regulations.

2) The proposed building standards are within the parameters established by enabling legislation, and are not expressly within the exclusive jurisdiction of another agency.

The OSHPD's authority and jurisdiction is mandated by Alfred E. Alquist Hospital Facilities Seismic Safety Act (HSSA) (Health and Safety Code, Division 107, Part 7, Chapter 1, Articles 1 through 9, Sections 129675 through 130070). Specifically, Health and Safety Code Section 129850 authorizes the OSHPD to develop building standards in order to effectively carry out the Act. In addition, Health and Safety Code Section 130005(b) authorizes OSHPD to define seismic performance categories for structural and nonstructural elements used in the seismic evaluation of hospital buildings.

3) The public interest requires the adoption of the building standards.

Existing statute is intended to serve the public interest by assuring that health facilities are designed and constructed for the safety of the patients. The OSHPD has proposed these building standards under the authority to effectively carry out the HSSA.

4) The proposed building standards are not unreasonable, arbitrary, unfair, or capricious, in whole or in part.

The proposed building standards are not unreasonable, arbitrary, unfair, or capricious. Pursuant to SB 1953 (Chapter 740, Statute of 1994), hospitals are required, to evaluate each hospital building to determine their level of structural and nonstructural seismic performance and to progressively improve their expected performance level by specified deadlines. The OSHPD is responsible for defining structural performance categories (SPC) and nonstructural performance categories (NPC), as originally described in SB1953 provisions, for use by the hospitals in evaluating hospital buildings. Additionally, OSHPD is authorized to define additional seismic performance categories, as necessary. The proposed building standards will provide hospitals with a new nonstructural performance category, NPC-3R, which will be applicable to older hospital buildings that have been evaluated as an SPC-1 or SPC-2 and that may remain operational only until January 1, 2030. The new NPC-3R is an optional performance

objective for SPC-1 and SPC-2 buildings and will provide less restrictive requirements than the existing NPC-3. The NPC-3R requirements will exempt lateral bracing of suspended ceilings in specified rooms with a floor area of less than 300 square feet.

Additionally, the initial seismic safety and retrofit regulations implementing SB 1953 were adopted in the mid-1990's and were based on the 1995 California Building Code (CBC), which is the 1994 Uniform Building Code (UBC) with California amendments. The nonstructural anchorage and bracing requirements have changed significantly since the adoption of the 1995 CBC. The adoption of 2001 CBC, which is based on 1997 UBC, dramatically increased the design loads for most of the nonstructural components. These extensive changes have resulted in an increase in design forces which has a minor impact on new construction; however, using these higher design forces for older SPC-1 and SPC-2 hospital buildings can create anomalous conditions. The proposed building standards will directly relate nonstructural bracing requirements to the expected structural performance of a hospital building.

5) The cost to the public is reasonable, based on the overall benefit to be derived from the building standards.

These proposed regulations will result in cost savings for applicable seismic retrofit projects and remodel projects. The regulations will not result in cost to the public.

6) The proposed building standards are not unnecessarily ambiguous or vague, in whole or in part.

The Hospital Building Safety Board, an advisory board for OSHPD, reviewed this proposal during its development and found the proposed building standards to be compliant Health and Safety Code Section 18930(a).

7) The applicable national specifications, published standards, and model codes have been incorporated therein as provided in this part, where appropriate.

Applicable national specification, published standard and/or model code have been incorporated in these proposed building standards.

8) The format of the proposed building standards is consistent with that adopted by the Commission.

The format of this proposal is consistent with the format adopted by the California Building Standards Commission. The OSHPD has followed the procedural outline of the Commission and has complied with the requirements of the State Building Standards Law and Administrative Procedures Act.

9) The proposed building standards, if they promote fire and panic safety as determined by the State Fire Marshal, have the written approval of the State Fire Marshal.

The proposed building standards are not intended to promote fire and panic safety. The responsibility for determination and approval of this proposal is under the Office of the State Fire Marshal.